

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

People for Pearce

ADDRESS (number and street)

PO Box 2696

Check if different than previously reported. (ACC)

Hobbs

NM

88241-2696

2. FEC IDENTIFICATION NUMBER ▼

C C00463836

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

NM

02

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

11 / 27 / 2012

through

M M /

D D /

Y Y Y Y

12 / 31 / 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer James Francis

Signature of Treasurer James Francis

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

01 / 11 / 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
People for Pearce

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	1325	1825
(b) Total Contribution Refunds (from Line 20(d))	0	0
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	1325	1825
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	43278.98	51537.84
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	685
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	43278.98	50852.84
8. Cash on Hand at Close of Reporting Period (from Line 27).....	598927.07	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

People for Pearce

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1250	1250
(ii) Unitemized.....	75	75
(iii) TOTAL of contributions from individuals ▶	1325	1325
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	500
(d) The Candidate.....	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	1325	1825
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0	0
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0	0
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	0
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0	685
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0	0
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	1325	2510

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	43278.98	51537.84
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	0
21. OTHER DISBURSEMENTS	0	0
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	43278.98	51537.84

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	640881.05
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1325
25. SUBTOTAL (add Line 23 and Line 24).....	642206.05
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	43278.98
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	598927.07

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 21
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
People for Pearce

A. Full Name (Last, First, Middle Initial)
Jo McInerney

Mailing Address 1205 W 7th Street

City Roswell State NM Zip Code 88201-2105

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Landman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2012

Transaction ID : A-C30407

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Pueblo of Laguna Tribe

Mailing Address PO Box 237

City Laguna State NM Zip Code 87026-0237

FEC ID number of contributing federal political committee. **C**

Name of Employer American Indian Tribe Occupation American Indian Tribe

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2012

Transaction ID : A-C30408

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

1250.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 21	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
People for Pearce

Full Name (Last, First, Middle Initial) A. Bender Plaza Properties LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012
Mailing Address PO Box 2055		Amount of Each Disbursement this Period 720 Transaction ID : B-E-30373
City Hobbs State NM Zip Code 88241-2055	Purpose of Disbursement Rent/Utilities Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Bender Plaza Properties LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2012
Mailing Address PO Box 2055		Amount of Each Disbursement this Period 720 Transaction ID : B-E-30403
City Hobbs State NM Zip Code 88241-2055	Purpose of Disbursement Rent/Utilities Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Events Custom Catering LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012
Mailing Address 1030 E Bender Boulevard		Amount of Each Disbursement this Period 1068.13 Transaction ID : B-E-30370
City Hobbs State NM Zip Code 88240-2416	Purpose of Disbursement Campaign Event: Catering Candidate Name Category/Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	2508.13
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 21			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
People for Pearce

Full Name (Last, First, Middle Initial) A. Federal Express FedEx		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012
Mailing Address PO Box 94515		Amount of Each Disbursement this Period 67.99
City Palatine	State IL	Zip Code 60094-4515
Purpose of Disbursement Administrative/Salary/Overhead: Shipping	001 Category/ Type	
Candidate Name		Transaction ID : B-E-30375
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. File Right		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012
Mailing Address 3718 Bridle Trails Court		Amount of Each Disbursement this Period 2000
City College Station	State TX	Zip Code 77845-4497
Purpose of Disbursement Accounting	001 Category/ Type	
Candidate Name		Transaction ID : B-E-30376
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. File Right		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2012
Mailing Address 3718 Bridle Trails Court		Amount of Each Disbursement this Period 2000
City College Station	State TX	Zip Code 77845-4497
Purpose of Disbursement Accounting	001 Category/ Type	
Candidate Name		Transaction ID : B-E-30404
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4067.99
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 21	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
People for Pearce

Full Name (Last, First, Middle Initial) A. Hispano Chamber Of Commerce de Las Cruces		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2012
Mailing Address PO Box 1964		Amount of Each Disbursement this Period 400 Transaction ID : B-E-30411
City Las Cruces	State NM	
Zip Code 88004-1964	Purpose of Disbursement Advertising: Advertising	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Hobbs Hispano Chamber of Commerce, Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012
Mailing Address 113 N Shipp Street		Amount of Each Disbursement this Period 525 Transaction ID : B-E-30372
City Hobbs	State NM	
Zip Code 88240-6041	Purpose of Disbursement Advertising: Media Advertising	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. KLMA Radio		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2012
Mailing Address PO Box 457		Amount of Each Disbursement this Period 213.38 Transaction ID : B-E-30401
City Hobbs	State NM	
Zip Code 88241-0457	Purpose of Disbursement Advertising: Media Advertising	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1138.38
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 21			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
People for Pearce

Full Name (Last, First, Middle Initial) A. Lea County Event Center			Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2012	
Mailing Address 5101 N Lovington Highway			Amount of Each Disbursement this Period 744.98	
City Hobbs	State NM	Zip Code 88240-9132	Transaction ID : B-E-30400	
Purpose of Disbursement Campaign Event: Election Night Event		Category/ Type 007		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Lea County State Bank			Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2012	
Mailing Address 1017 N Turner Street			Amount of Each Disbursement this Period 50	
City Hobbs	State NM	Zip Code 88240-5150	Transaction ID : B-E-30398	
Purpose of Disbursement Credit Card Fees		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Targeted Creative Communications, Inc.			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012	
Mailing Address 106 S Columbus Street			Amount of Each Disbursement this Period 2394	
City Alexandria	State VA	Zip Code 22314-3036	Transaction ID : B-E-30371	
Purpose of Disbursement Advertising: Media Advertising		Category/ Type 004		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	3188.98
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 21	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
People for Pearce

Full Name (Last, First, Middle Initial) A. Townsend Group		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012
Mailing Address 1006 Pendleton Street		Amount of Each Disbursement this Period 5500 Transaction ID : B-E-30374
City Alexandria	State VA	
Zip Code 22314-1837	Purpose of Disbursement Fundraising: Consultant-Fundraising	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. VISA		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2012
Mailing Address PO Box 30131		Amount of Each Disbursement this Period 1248.55 Transaction ID : B-E-30362
City Tampa	State FL	
Zip Code 33630-3131	Purpose of Disbursement Credit Card: See Details	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Original vendors exceeding reporting threshold itemized as memo transactions.

Full Name (Last, First, Middle Initial) c. La Quinta Hotel		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2012
Mailing Address 200 E 19th Street		Amount of Each Disbursement this Period 83.82 Transaction ID : B-S-18688
City Roswell	State NM	
Zip Code 88201-5101	Purpose of Disbursement Lodging	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	[MEMO ITEM] Subitemization of VISA(12/12/12)

SUBTOTAL of Disbursements This Page (optional).....	6748.55
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 21	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
People for Pearce

Full Name (Last, First, Middle Initial) A. Enterprise Rent-A-Car		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2012
Mailing Address PO Box 9923		Amount of Each Disbursement this Period 609.3
City Albuquerque	State NM	
Zip Code 87119-1023	Purpose of Disbursement Rental Car	Transaction ID : B-S-18693
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of VISA(12/12/12)
State: District:		

Full Name (Last, First, Middle Initial) B. Best Western Inn		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2012
Mailing Address 200 E Estrella Avenue		Amount of Each Disbursement this Period 396.05
City Tucumcari	State NM	
Zip Code 88401-4227	Purpose of Disbursement Lodging	Transaction ID : B-S-18694
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of VISA(12/12/12)
State: District:		

Full Name (Last, First, Middle Initial) C. VISA		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2012
Mailing Address PO Box 30131		Amount of Each Disbursement this Period 177.09
City Tampa	State FL	
Zip Code 33630-3131	Purpose of Disbursement Credit Card: See Details	Transaction ID : B-E-30395
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	177.09
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 21	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
People for Pearce

Full Name (Last, First, Middle Initial) A. VISA		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2012
Mailing Address PO Box 30131		Amount of Each Disbursement this Period 892.53
City Tampa	State FL	Zip Code 33630-3131
Purpose of Disbursement Credit Card: See Details	Category/Type 001	
Candidate Name	Transaction ID : B-E-30396	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) B. Federal Express FedEx		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2012
Mailing Address PO Box 94515		Amount of Each Disbursement this Period 182.54
City Palatine	State IL	Zip Code 60094-4515
Purpose of Disbursement Shipping	Category/Type 001	
Candidate Name	Transaction ID : B-S-18712	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of VISA(12/12/12)
State: District:		

Full Name (Last, First, Middle Initial) C. Pacific Rim		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2012
Mailing Address 1309 W Joe Harvey Boulevard		Amount of Each Disbursement this Period 106.95
City Hobbs	State NM	Zip Code 88240-0997
Purpose of Disbursement Meals	Category/Type 002	
Candidate Name	Transaction ID : B-S-18713	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of VISA(12/12/12)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	892.53
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 21			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
People for Pearce

Full Name (Last, First, Middle Initial) A. Windstream		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2012
Mailing Address PO Box 9001908		Amount of Each Disbursement this Period 526.32
City Louisville	State KY	Zip Code 40290-1908
Purpose of Disbursement Telephone	001 Category/ Type	
Candidate Name	Transaction ID : B-S-18714	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of VISA(12/12/12)
State: District:		

Full Name (Last, First, Middle Initial) B. Pamela Benge		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012
Mailing Address 1505 N 2nd Street		Amount of Each Disbursement this Period 250
City Lovington	State NM	Zip Code 88260-2807
Purpose of Disbursement Accounting	001 Category/ Type	
Candidate Name	Transaction ID : B-E-30377	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Pamela Benge		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2012
Mailing Address 1505 N 2nd Street		Amount of Each Disbursement this Period 250
City Lovington	State NM	Zip Code 88260-2807
Purpose of Disbursement Accounting	001 Category/ Type	
Candidate Name	Transaction ID : B-E-30406	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 21			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
People for Pearce

Full Name (Last, First, Middle Initial) A. Patrick Cuff		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012
Mailing Address 1884 Columbia Road NW Apt. 1005		Amount of Each Disbursement this Period 60 Transaction ID : B-E-30365
City Washington State DC Zip Code 20009-5157	Purpose of Disbursement Reimbursement: See Details 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) B. Patrick Cuff		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012
Mailing Address 1884 Columbia Road NW Apt. 1005		Amount of Each Disbursement this Period 500 Transaction ID : B-E-30380
City Washington State DC Zip Code 20009-5157	Purpose of Disbursement Field Representative 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Andrea Goff		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012
Mailing Address 9700 Goff Place		Amount of Each Disbursement this Period 3000 Transaction ID : B-E-30379
City Hobbs State NM Zip Code 88240-8856	Purpose of Disbursement Fundraising: Consultant-Fundraising 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3560.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 21			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
People for Pearce

Full Name (Last, First, Middle Initial) A. Andrea Goff		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2012
Mailing Address 9700 Goff Place		Amount of Each Disbursement this Period 10000 Transaction ID : B-E-30397
City Hobbs State NM Zip Code 88240-8856	Purpose of Disbursement Fundraising: Consultant-Fundraising Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Andrea Goff		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2012
Mailing Address 9700 Goff Place		Amount of Each Disbursement this Period 3000 Transaction ID : B-E-30405
City Hobbs State NM Zip Code 88240-8856	Purpose of Disbursement Fundraising: Consultant-Fundraising Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Jason Heffley		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012
Mailing Address 7137 Rock Ridge Lane Apt. G		Amount of Each Disbursement this Period 200 Transaction ID : B-E-30369
City Alexandria State VA Zip Code 22315-5158	Purpose of Disbursement Reimbursement: See Details Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Original vendors exceeding reporting threshold itemized as memo transactions.

SUBTOTAL of Disbursements This Page (optional).....	13200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 21			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
People for Pearce

Full Name (Last, First, Middle Initial) A. Jason Heffley		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012
Mailing Address 7137 Rock Ridge Lane Apt. G		Amount of Each Disbursement this Period 2000 Transaction ID : B-E-30378
City Alexandria	State VA Zip Code 22315-5158	
Purpose of Disbursement Field Representative	001 Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Emily Hytha		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012
Mailing Address 1705 P Street NW Apt. 4		Amount of Each Disbursement this Period 350 Transaction ID : B-E-30385
City Washington	State DC Zip Code 20036-1321	
Purpose of Disbursement Field Representative	001 Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Peter Ilbaro		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012
Mailing Address 3536 Sierra Bonita Avenue		Amount of Each Disbursement this Period 350 Transaction ID : B-E-30382
City Las Cruces	State NM Zip Code 88012-0783	
Purpose of Disbursement Field Representative	001 Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 21	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
People for Pearce

Full Name (Last, First, Middle Initial) A. Tim Keithley		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012
Mailing Address 1703 Sudderth Drive # 435		Amount of Each Disbursement this Period 577.35
City Ruidoso State NM Zip Code 88345-6114	Purpose of Disbursement Reimbursement: See Details	Transaction ID : B-E-30366
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) B. WalMart Supercenter		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012
Mailing Address 3800 N Lovington Highway		Amount of Each Disbursement this Period 357.12
City Hobbs State NM Zip Code 88240-1033	Purpose of Disbursement Office Supplies	Transaction ID : B-S-18706
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Tim Keithley(11/29/12)
State: District:		

Full Name (Last, First, Middle Initial) c. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012
Mailing Address 2512 E Lohman Avenue		Amount of Each Disbursement this Period 220.23
City Las Cruces State NM Zip Code 88011-8229	Purpose of Disbursement Fuel	Transaction ID : B-S-18707
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Tim Keithley(11/29/12)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	577.35
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 21	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
People for Pearce

Full Name (Last, First, Middle Initial) A. J. Joe Martinez		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012
Mailing Address 2231 Sedona Hills Parkway		Amount of Each Disbursement this Period 257
City Las Cruces	State NM	Zip Code 88011-4140
Purpose of Disbursement Reimbursement: See Details	Category/Type 001	
Candidate Name	Transaction ID : B-E-30367	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) B. Valero		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012
Mailing Address 657 S White Sands Boulevard		Amount of Each Disbursement this Period 257
City Alamogordo	State NM	Zip Code 88310-7904
Purpose of Disbursement Fuel	Category/Type 002	
Candidate Name	Transaction ID : B-S-18708	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of J. Joe Martinez(11/29/12)
State: District:		

Full Name (Last, First, Middle Initial) c. Katherine Mauss		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012
Mailing Address 2011 Sentry Circle Apt. 202		Amount of Each Disbursement this Period 41.32
City Odenton	State MD	Zip Code 21113-3240
Purpose of Disbursement Reimbursement: See Details	Category/Type 001	
Candidate Name	Transaction ID : B-E-30368	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	298.32
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 21			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
People for Pearce

Full Name (Last, First, Middle Initial) A. Katherine Mauss		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012
Mailing Address 2011 Sentry Circle Apt. 202		Amount of Each Disbursement this Period 350
City Odenton	State MD	Zip Code 21113-3240
Purpose of Disbursement Field Representative	Category/Type 001	
Candidate Name	Transaction ID : B-E-30384	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Stevan E. Pearce		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2012
Mailing Address PO Box 1830		Amount of Each Disbursement this Period 464.9
City Hobbs	State NM	Zip Code 88241-1830
Purpose of Disbursement Reimbursement: See Details	Category/Type 001	
Candidate Name	Transaction ID : B-E-30412	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Original vendors exceeding reporting threshold itemized as memo transactions.	

Full Name (Last, First, Middle Initial) C. Windstream		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2012
Mailing Address PO Box 9001908		Amount of Each Disbursement this Period 464.9
City Louisville	State KY	Zip Code 40290-1908
Purpose of Disbursement Telephone	Category/Type 001	
Candidate Name	Transaction ID : B-S-18716	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] Subitemization of Stevan Pearce(12/31/12)	

SUBTOTAL of Disbursements This Page (optional).....	814.90
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 21	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
People for Pearce

Full Name (Last, First, Middle Initial) A. Stevan E. Pearce		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2012
Mailing Address PO Box 1830		Amount of Each Disbursement this Period 1083.41
City Hobbs	State NM	
Zip Code 88241-1830	Purpose of Disbursement Reimbursement: See Details	Transaction ID : B-E-30413
Candidate Name	007 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) B. Pacific Rim		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2012
Mailing Address 1309 W Joe Harvey Boulevard		Amount of Each Disbursement this Period 1083.41
City Hobbs	State NM	
Zip Code 88240-0997	Purpose of Disbursement Catering	Transaction ID : B-S-18717
Candidate Name	007 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Stevan Pearce(12/31/12)
State: District:		

Full Name (Last, First, Middle Initial) c. Zach Riley		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012
Mailing Address PO Box 461		Amount of Each Disbursement this Period 500
City Roswell	State NM	
Zip Code 88202-0461	Purpose of Disbursement Field Representative	Transaction ID : B-E-30381
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1583.41
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 21			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
People for Pearce

Full Name (Last, First, Middle Initial) A. Barbara L. Romero		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012
Mailing Address 925 Lawndale Drive		Amount of Each Disbursement this Period 350 Transaction ID : B-E-30387
City Socorro State NM Zip Code 87801-4095	Purpose of Disbursement Field Representative Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) State: District:	
Category/Type 001		

Full Name (Last, First, Middle Initial) B. Jonathan Shuffield		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012
Mailing Address PO Box 2696		Amount of Each Disbursement this Period 350 Transaction ID : B-E-30386
City Hobbs State NM Zip Code 88241-2696	Purpose of Disbursement Field Representative Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) State: District:	
Category/Type 001		

Full Name (Last, First, Middle Initial) c. Kristen Willingham		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012
Mailing Address 518 9th Street NE Apt. 412		Amount of Each Disbursement this Period 350 Transaction ID : B-E-30383
City Washington State DC Zip Code 20002-5372	Purpose of Disbursement Field Representative Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) State: District:	
Category/Type 001		

SUBTOTAL of Disbursements This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	43005.63